



HEADQUARTERS
MISSISSIPPI WING CIVIL AIR PATROL
UNITED STATES AIR FORCE AUXILIARY
1635 AIRPORT DRIVE
JACKSON, MS 39209

APPLICATION FOR CIVIL AIR PATROL DRIVER'S LICENSE

My Initials indicate that I:

- _____ A. Have read and will comply with CAPR 77-1.
_____ B. Understand that in the event of an accident where I am found to be at fault, I will be responsible for the first \$250.00 in damages.
_____ C. Agree to operate CAP vehicles in a safe manner at all times.
_____ D. Will inspect vehicle as per CAPF 73 prior to operation.
_____ E. Will complete CAPF 73 as required and will report damage or mechanical problems to the Transportation Officer of Unit Commander immediately. (Unreported damage discovered will be considered to have been caused by the last driver of the vehicle.)
_____ F. Will fuel the vehicle and add oil and other fluids as necessary after use. (Fuel must be topped off if less than 3/4 of a tank.)
_____ G. Will obey posted speed limits and assure that all passengers have seat belts fastened when the vehicle is in motion.

Type of Vehicle: _____ Cars and Minivans _____ Pickups _____ Vans to 15 Passengers

Unit: _____ CAPID: _____

State Driver's License Number: _____ Expires: _____

Applicant: _____ Date: _____
(Print or Type Name) (Signature)

APPROVED

Unit Commander: _____ Date: _____
(Print or Type Name) (Signature)

REVIEWED

Wing Transportation Officer: _____ Date: _____

APPROVED

Wing Commander: _____ Date: _____

Card No: _____ Driver's Record Review: _____ Expires: _____

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PROCEDURE:

1. Applicant:
 - A. Complete a MS WG CAP Driver's License application form, dated 12 December 2003 (previous versions shall not be used).
 - B. Obtain a copy of your Driver's Record. This is available from the Department of Public Safety (Highway Patrol) or through the Wing (on as "as can" basis).
 - C. Make **legible** copies of your current membership card and State issued driver's license..
 - D. Attach your Driver's Record and the copies of your membership card and driver's license to the completed application and submit to your unit commander for approval.
2. Unit Commander:
 - A. Review the form and attachments for completeness and legibility.
 - B. You are reminded to carefully select members for CAP driver's licenses.
 - C. Mail or Fax the completed application and attachments to Wing Headquarters. (Mail: 1635 Airport Drive, Jackson, MS 39209 Fax: 601-354-9278.)